

Government Partners Meeting
January 11, 2008 10:00 am - 2:00 pm
CCP Conference Room: 815 S Street, Sacramento

DRAFT AGENDA

Time	Item	Subject	Handouts
10:00	1.	Overview and Business Items <ul style="list-style-type: none"> ▪ Agenda Review ▪ Announcements ▪ Confirmation of November 19 Minutes 	Agenda & Materials November 19, 2007 Minutes
10:15	2.	Informational and Request Items <ul style="list-style-type: none"> ▪ AB 2034 Litigation ▪ Authorize staff to develop proposal for a "Complaints and Investigations Process" ▪ Revised Overall MHSA Timeline 	
10:30	3.	Next Steps: Stakeholder Participation Issues <ul style="list-style-type: none"> ▪ Report Back on Conversations w/ Stakeholders ▪ Issues Raised at GP 11.19.07 Meeting ▪ CMHDA handouts ▪ Draft of Next Steps 	Summary of 11.19.07 Discussion on Stakeholder Participation (See Attachment to 11.19.07 Minutes) Local Participation in the Community Engagement Process (CMHDA) Draft Next Steps (hand-carry)
11:15	4.	County and State Administered Projects <ul style="list-style-type: none"> ▪ Flowchart: County Administered – Coordination with Regional and State Partners ▪ Administration/ Implementation of Statewide Projects? ▪ DMH Approach and Timeframes for State Administered Workforce Projects 	Three Flowcharts: *** County-Administered *** County Administered – Coordination with Regional and State Partners (CMHDA) *** State-Administered State- Administered Projects (CMHDA handout) Matrix for Decisions on Global Amounts
Noon		Quick Break / Working Lunch	
12:20	5.	Student Mental Health Initiative <ul style="list-style-type: none"> ▪ Report back from CMHDA on discussion with counties ▪ Do we need any more approvals or specifics? (Have we arrived at step #9 on the State-Administered Projects Timeline?) ▪ Staff development of RFP 	State-Administered Projects Timeline
1:00	6.	Evaluation Coordination Work Group (ECWG) <ul style="list-style-type: none"> ▪ Revised Goals, Responsibilities and Deliverables ▪ Staffing 	Revised Goals, Responsibilities & Deliverables – Revision
1:30	7.	Wrap Up (10 Minutes) <ul style="list-style-type: none"> ▪ Review assignments from today ▪ Identifying future meeting dates ▪ Items for next meeting: <ul style="list-style-type: none"> ○ Understanding the effects of smoking on mental health clients ○ Discussion on Systems Innovation 	
2:00	8.	Adjourn <i>(We may be able to adjourn a bit early but please plan to stay until 2 pm.)</i>	

Minutes
Mental Health Services Act (MHSA) Government Partners (GP) Meeting

Date: January 11, 2008 10 AM – 2 PM

Location: Center for Collaborative Policy, 815 S Street, Sacramento

Participants:

- Oversight and Accountability Commission (OAC): Wes Chesbro, Sheri Whitt, Cynthia Kraft
- California Mental Health Directors Association (CMHDA): Nancy Pena, Mark Refowitz, Patricia Ryan, Stephanie Welch
- California Mental Health Planning Council (CMHPC): Ann Arneill-Py, Walter Shwe
- California Department of Mental Health (DMH): Stephen Mayberg, Elaine Bush, Carol Hood, Denise Arend

Guests:

- DMH: Emily Nahat, Warren Hayes, Stephanie Oprendek
- OAC: Eduardo Vega (Commissioner)

Agenda Item	Discussion	Recommendation
1. Overview and Business Items		
1a. Agenda additions	A discussion of Workforce Education and Training plans was added to agenda item #4.	<ul style="list-style-type: none"> Government Partners (GP) agreed to change in agenda.
1b. Approval of November 19, 2007 Minutes	Government Partners reviewed the previous meeting's minutes.	<ul style="list-style-type: none"> November meeting minutes accepted.
2. Informational and Request Items		
2a. AB 2034 Litigation	AB 2034 litigation acknowledged by Government Partners. No discussion.	<ul style="list-style-type: none"> No recommendation on AB 2034
2b. Authorize staff to develop proposal for a "Complaints and Investigations Process"	<p>Government Partners discussed the need for a formal complaints and investigation process and agreed on the need for:</p> <ul style="list-style-type: none"> ➤ A formal system to investigate and respond complaints ➤ All Government Partner organizations to be involved in the system ➤ Each Government Partner organization to approve the proposal for the Complaints and Investigation Process. 	<ul style="list-style-type: none"> Mike Borunda at DMH will assemble a staff group to create a proposal for investigating and responding to public complaints. Staff from all Government Partners organizations encouraged to participate. The proposal will then be vetted with stakeholders and returned to Government Partners for review and recommendations.
3. Next Steps: Stakeholder Participation Issues	<p>The Government Partners identified two distinct concerns with regard to stakeholder participation:</p> <p>1. Key stakeholder organizations are concerned that they are not included in Government Partners meetings. They have a need for more up-to-date information and they are also concerned that the GP are serving in a decision-making capacity without their knowledge or input. Some stakeholder organizations have requested to participate and / or observe the GP</p>	<ul style="list-style-type: none"> All Government Partners meeting agendas and minutes will be posted to the DMH website for public viewing. Agendas will be post prior to GP meetings and minutes will be posted in a timely manner. DMH will host regular periodic conference calls to update stakeholder organizations (e.g. Community Partners, etc) on MHSA and Government Partners activities. CMHDA, OAC and CMHPC will also participate in these calls. The calls will

<p>3. Next Steps: Stakeholder Participation Issues, Continued</p>	<p>meetings.</p> <p>The GP discussed importance and high value of inclusion. Consumer and family member participation is at heart of MHSA. Key challenge is how do we accomplish the work in a timely way, get the money out, and also ensure wide participation and input.</p> <p>2. The Government Partners want guidance from stakeholders and the public on how to make the MHSA's broader participation processes more effective and coordinated. (See Attachment A for GP questions on this issue.)</p> <p>Carol Hood reported that DMH has hired consultants to ask stakeholders to identify their needs with regard to participation and to seek advice on Attachment A questions. Consultants will do interviews w/ stakeholders and conduct a public meeting on Feb 27. Then, GP will have more guidance from stakeholders to further discuss these issues.</p>	<p>have both an informational and input segment.</p> <ul style="list-style-type: none"> Government Partners work is to implement, coordinate and to make recommendations to Government Partner organizations on "the how," not to make decisions. GP is considering a name change to better reflect its role as an administrative and operations group. Input from stakeholders is important prior to making changes in name and / or function of Government Partners. The Government Partners would like to further explore stakeholder and public participation issues after it has the information from stakeholder interviews and the Feb. 27 broad stakeholder meeting. It also wants to further clarify its operational role and determine what stakeholder inclusion is needed to make the GP more effective.
<p>4. County and State Administered Projects</p>	<p>Discussed statewide / state administered projects with particular attention paid to Workforce, Education, and Training (WET) statewide projects.</p> <p>\$200 million in WET funding has been made available -- \$100 million for local programs and \$100 million for statewide / regional projects.</p> <p>Additional funding for WET projects will be available only after the WET 5 Year Strategic Plan is approved by CMHPC, expected in April, 2008.</p> <p>Government Partners discussed how statewide WET projects as well as all other statewide project should be administered. CMHDA believes that most statewide projects should be administered at local and regional levels, in order to better assure timely distribution of resources to communities, and reduce or eliminate the need for DMH to obtain legislative authority for administering the projects, which could further delay the process.</p>	<ul style="list-style-type: none"> Carol Hood and Warren Hayes will provide a breakdown of WET statewide projects, funding amounts, and timelines to Government Partners before their next meeting. (See Attachment B.) DMH, in consultation with CMHDA and with input from OAC and CMHPC, will explore various options for the administration of statewide projects, particularly with regard to options for local, regional and JPA administration. The discussion of options will include the administration of WET statewide projects as well as all other pending MHSA statewide projects, including the administration of statewide Student Mental Health Initiative and other PEI projects. This proposal to come back to Government Partners for review at the next Government Partners meeting
<p>5. Student Mental Health Initiative (SMHI)</p>	<p>While supportive of the SMHI, CMHDA and the counties have expressed concern that SMHI was adopted without full discussion with and concurrence of the counties, or a full understanding about the need for county support if they are to be expected to assign local funding for</p>	<ul style="list-style-type: none"> The administration of SMHI projects is a subset of the discussion regarding how all MHSA statewide projects should be administered. See discussion above, Agenda Item #4. DMH, in consultation with CMHDA and with input from OAC and CMHPC, will develop a proposal for the

	the project back to the state to administer it as a "statewide" program.	administration of PEI projects and bring proposal to the next Government Partners meeting for review and recommendation.
6. Evaluation Coordination Work Group (ECWG)	Stephanie Oprendeck, DMH, announced that the first meeting of the ECWG will take place on January 22. Tamara Garcia, DMH, will be the project manager. The ECWG will focus on all mental health issues, not just MHSA.	<ul style="list-style-type: none"> Government Partners suggested minor changes to the ECWG "Goals, Responsibilities, and Deliverables." (See Attachment C.)
7. Wrap Up	Discussed scheduling. Government Partners require more predictability in the schedule for future meetings.	<ul style="list-style-type: none"> Government Partners will hold their next meeting on February 25 from 10:00- 3:00 at CMHDA offices, located at 2125 19th Street in Sacramento. The following meeting will be held on April 7 from 10:00- 3:00 in Sacramento.

The Government Partners would like guidance from stakeholders and the public on how to make the MHSA's broader participation processes more effective and coordinated. Specifically, the Government Partners would like stakeholder and public advice on the following questions:

- How do we ensure and enhance high inclusion from stakeholders and the public and also ensure timely decision-making that gets MHSA money out on the street?
- How do we honor and heed the recommendations of local county stakeholder processes while at the same time recognize the importance of input that is provided at statewide venues, for example at OAC and DMH statewide meetings.
- How do we get input from the statewide organizations sooner so that it can be concurrent with the local input? How can statewide organizations participate in local planning efforts so that the public participation process can honor the bottoms-up process?
- What principles and values can we all agree upon to guide how MHSA stakeholder and public participation is structured?
- Who are the various stakeholders, when do they want to be involved, and what strategies maximize inclusion?
- How do we monitor the public participation process to evaluate whether it is measuring up to our principles and values? How do we judge the outcome of the various stakeholder and public participation processes MHSA sponsors?
- What concerns do stakeholders, stakeholder organizations and the public have about MHSA current public participation and engagement programs / processes? How can we address those concerns?

**Implementation Strategies
Workforce Education and Training Recommendations
For Collaborative (State/Regional Level) Programs
1/16/08**

	Stakeholder Recommendation	Implementation Strategy	Expected Start Date	Estimated Funding
1.	Client Family Member Statewide Technical Assistance Center	Fund as soon as competitive process is completed.	FY 07/08	\$800k/year
2.	Regional Partnerships Staffing Support	Directly fund host counties based on CMHDA recommendations.	FY 07/08	\$2.5m/year
3.	Distance Learning - Convert 5 MHSA Topics to E-learning	Fund as soon as competitive process is completed.	FY 07/08	\$1.6m one-time
4a.	Stipend Programs – Social Workers	Continue funding CalSWEC	ongoing	\$5.8m/year
4b.	Stipend Programs—MFT, Psych Nurses, Psychologists	Fund as soon as competitive process is completed.	FY 08/09	\$4.2m/year
5.	Psychiatric Residency Programs	Fund as soon as competitive process is completed.	FY 08/09	\$1.35m/year
6.	Physician Assistant Programs	Move forward w/ program planning with OSHPD	FY 08/09	\$450k/year
7.	Loan Assumption Programs	Explore options for partnerships with governmental and private entities	FY 08/09	\$10m/year
8.	Client Employment Preparation Programs	Analyze local plans to determine if supplemental state/regional effort is needed	Pending analysis	\$2m annually, if needed
9.	MH Career Pathway Programs	Analyze local plans to determine if supplemental state/regional effort is needed.	Pending analysis	\$1.35m annually, if needed
10.	Developing Leaders	Analyze local plans to determine if supplemental state/regional effort is needed.	Pending analysis	\$350k annually, if needed
11.	Developing Trainers	Analyze local plans to determine if supplemental state/regional effort is needed.	Pending analysis	\$350k annually, if needed

Goals

The work group has been developed to address the following goals:

1. To use MHSA funding ~~to~~ towards the end goal of transforming ~~transform~~ the entire public mental health system
2. To achieve integration of performance measurement for the MHSA with performance measurement for the entire public mental health system
3. To ~~measure~~ identify outcomes, to promote quality improvement, and to communicate the results to the multiple audiences to which the public mental health system is accountable
4. To decrease duplication and overlap among the DMH, the CMHPC, and the MHSOAC in performance measurement and accountability
5. To simplify reporting requirements for county mental health departments and community-based agencies

Responsibilities

The DMH, CMHPC, and MHSOAC are proposing an Evaluation Coordination Work Group to accomplish the goals that they share in addressing the problem of duplication of responsibilities for outcomes and accountability. They have chosen a “Meet and Recommend model” as the operating approach for this work group. The work group would have only advisory authority. The government ~~partners~~ entities would retain their statutory authority and independence in decision-making. The work group must reach consensus before making recommendations back to their organizations. The work group will not be performing detailed tasks, such as developing performance outcome measures. Rather, it would be responsible for recommending assignment of tasks and responsibilities to government ~~partners~~ entities and other groups.

The work group would start with the following roles and responsibilities:

1. Beginning with the Accountability Framework and the tri-level paradigm, determine what tasks are already being performed and how best to coordinate those tasks among government ~~partners~~ entities and other groups and how to ensure collaboration
2. Identify duplication of effort among government ~~partners~~ entities and make recommendations to minimize it
3. Determine what gaps exist in the work needed to assure quality improvement and accountability of the MHSA and the public mental health system and make recommendations for how to ensure that necessary tasks are performed by the appropriate government ~~partner~~ entities or other group.

Deliverables

The work group will initially produce the following deliverables to result in a situational assessment:

First Meeting

1. Review the Tri-level paradigm
2. Review the Accountability Framework
3. Discuss the utility of the two above approaches
4. Recommend initial scope and effect on deliverables; e.g., should the work begin with a specific component of the MHSA, all components of the MHSA, or with accountability for the public mental health system and how MHSA accountability is integrated within that system?
5. For whatever scope is selected, determine the fundamental questions that “tell the story” for evaluating performance and for establishing accountability

Second, Third, and Fourth Meetings

1. Generate the performance indicators that provide answers to the fundamental questions
2. Identify whether data exist to measure the performance indicators, where there are gaps, and any duplication of effort
3. Discuss methodology for data collection and reporting